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State of New Hampshire 2004 ANNUAL REPORT

The following information shall be given as of January 1 preceeding the due date Pursuant to RSA 293-A:16.22. REPORT DUE BY April 1, 2004

ANNUAL REPORTS RECEIVED AFTER APRIL 15, 2004, WILL BE ASSESSED A \$50.00 LATE FEE.

Filed

Effective Date: 03/15/2004

Business ID: 177990

William M. Gardner

Secretary of State

200407590266

BARLETTA ENGINEERING CORPORATION 10 WHIPPLE AVE ROSLINDALE, MA 02131

ENTITY TYPE:	CORPORATION
BUSINESS ID:	177990
STATE OF DOMICILE:	MASSACHUSETTS
FEDERAL ID:	043034210
HEAVY CONSTRUCTION	

ADDRESS OF PRINCIPAL OFFICE:

10 WHIPPLE AVE

ROSLINDALE, MA 02131

REGISTERED AGENT AND OFFICE:

JOHN DARGIN

5 BATCHELDER RD

SEABROOK, NH 03874

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

The new mailing address 40 SHAWMUT ROAD, CANTON, MA 02021-1409

The new principal office address 40 SHAWMUT ROAD, CANTON, MA 02021-1409

PO Box is acceptable.

		OFFICERS	BOARD OF DIRECTORS				
	NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE). (MUST LIST AT LEAST ONE OFFICER BELOW) A		NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE). (MUST LIST AT LEAST ONE DIRECTOR BELOW)		ъ		
					B		
	PRES	VINCENT F. BARLETTA	NAME	VINCENT F. BARLETTA			
	STREET	6 GLENFIELD EAST	STREET	6 GLENFIELD EAST			
	CITY/STATE/ZIP WESTON, MA 02493		CITY/STATE/ZIP WESTON, MA 02493		_		
	TREAS	CHRISTOPHER BARLETTA	NAME	CHRISTOPHER BARLETTA			
3	STREET	70 THOREAU ROAD	STREET	70 THOREAU ROAD			
Э	CITY/STATE/ZIP CANTON, MA 02021		CITY/STATE/ZIP CANTON, MA 02021				
	Othe	TIMOTHY J. BARLETTA	NAME	TIMOTHY J. BARLETTA			
	STREET	550 COMMON STREET	STREET	550 COMMON STREET			
	CITY/STATE/ZIP DEDHAM, MA 02026		CITY/STATE/ZIP DEDHAM, MA 02026				
	NAME		NAME				
	STREET		STREET				
	CITY/STATE/ZI	IP .	CITY/STATE/ZIP				
		NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED					

To be signed by an officer, Director, or any other person authorized by the board of directors.

I, the undersigned do hereby Certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here: VINCENT F. BARLETTA

Please print name and title of signer: VINCENT F. BARLETTA / PRESIDENT

NAME TITLE

REPORT FEE IS: \$100.00

E-MAIL ADDRESS (OPTIONAL):



WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE RETURN COMPLETED REPORT AND PAYMENT TO: